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8504-5

EPA

PO...TIAL HAZARDOUS WASTE SITE
SITE INSPECTION REPORT

REGION	SITE NUMBER (to be assigned by Hq)
VI	AR01171

GENERAL INSTRUCTIONS: Complete Sections I and III through XV of this form as completely as possible. Then use the information on this form to develop a Tentative Disposition *(Section II)*. File this form in its entirety in the regional Hazardous Waste Log File. Be sure to include all appropriate Supplemental Reports in the file. Submit a copy of the forms to: U.S. Environmental Protection Agency; Site Tracking System; Hazardous Waste Enforcement Task Force *(EN-335)*, 401 M St., SW; Washington, DC 20460.

I. SITE IDENTIFICATION

ARD990742934

A. SITE NAME	B. STREET (or other identifier)		
Union Carbide (UMETCO)	Rt 5 Box 943 Hot Springs Ark. Hwy 270E.		
C. CITY	**D. STATE**	**E. ZIP CODE**	**F. COUNTY NAME**
Hot Springs	AR	71901	Garland

G. SITE OPERATOR INFORMATION

1. NAME	2. TELEPHONE NUMBER		
Terry Washburn (Plant Manager)	(501)262-1270		
3. STREET	**4. CITY**	**5. STATE**	**6. ZIP CODE**
Rt. 5 Box 943 Hwy 270 E	Hot Springs	AR	70901

H. REALTY OWNER INFORMATION *(if different from operator of site)*

1. NAME	2. TELEPHONE NUMBER	
Same as above		
3. CITY	**4. STATE**	**5. ZIP CODE**

I. SITE DESCRIPTION

Vanadium Oxide mining & manufacturer

J. TYPE OF OWNERSHIP

☐ 1. FEDERAL ☐ 2. STATE ☐ 3. COUNTY ☐ 4. MUNICIPAL ☒ 5. PRIVATE

II. TENTATIVE DISPOSITION *(complete this section last)*

A. ESTIMATE DATE OF TENTATIVE DISPOSITION (mo., day, & yr.)	B. APPARENT SERIOUSNESS OF PROBLEM
	☐ 1. HIGH ☐ 2. MEDIUM ☒ 3. LOW ☐ 4. NONE

C. PREPARER INFORMATION

1. NAME	2. TELEPHONE NUMBER	3. DATE (mo., day, & yr.)
Raymond W. Roblin	(214) 742-6601	August 23, 1985

III. INSPECTION INFORMATION

A. PRINCIPAL INSPECTOR INFORMATION

1. NAME	2. TITLE	
Raymond W. Roblin	FIT Geologist	
3. ORGANIZATION		**4. TELEPHONE NO. (area code & no.)**
Ecology and Environment, Inc. 1509 Main St.' Dallas, TX 75201		(214)742-6601

B. INSPECTION PARTICIPANTS

1. NAME	2. ORGANIZATION	3. TELEPHONE NO.
Dave Wineman	Ecology and Environment, Inc.	(214) 742-6601

C. SITE REPRESENTATIVES INTERVIEWED *(corporate officials, workers, residents)*

1. NAME	2. TITLE & TELEPHONE NO.	3. ADDRESS
Dave Lechak	Supervisor of Technical Services	(501) 262-1270 Rt. 5 Box 943; Hot Springs Ar. 71901

Reviewed by 6AW-SC date 6-28-92

SUPERFUND FILE

JUN 05 1992

REORGANIZED

100013192

Continued From Front

INSPECTION INFORMATION *(continued)*

D. GENERATOR INFORMATION *(sources of waste)*

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE GENERATED
None			

E. TRANSPORTER/HAULER INFORMATION

1. NAME	2. TELEPHONE NO.	3. ADDRESS	4. WASTE TYPE TRANSPORTED
None			

F. IF WASTE IS PROCESSED ON SITE AND ALSO SHIPPED TO OTHER SITES, IDENTIFY OFF-SITE FACILITIES USED FOR DISPOSAL.

1. NAME	2. TELEPHONE NO.	3. ADDRESS
None		

G. DATE OF INSPECTION (mo., day, & yr.)	H. TIME OF INSPECTION	I. ACCESS GAINED BY *(credentials must be shown in all cases)*
7/10/85	0800-12:00 hrs	[x] 1. PERMISSION [ ] 2. WARRANT

J. WEATHER *(describe)*

Sunny and warm upper 90°

IV. SAMPLING INFORMATION

A. Mark 'X' for the types of samples taken and indicate where they have been sent e.g., regional lab, other EPA lab, contractor, etc. and estimate when the results will be available.

1. SAMPLE TYPE	2. SAMPLE TAKEN (mark 'X')	3. SAMPLE SENT TO:	4. DATE RESULTS AVAILABLE
a. GROUNDWATER			
b. SURFACE WATER			
c. WASTE			
d. AIR			
e. RUNOFF			
f. SPILL			
g. SOIL			
h. VEGETATION			
i. OTHER (specify)	x	None taken during inspection	

B. FIELD MEASUREMENTS TAKEN *(e.g., radioactivity, explosivity, PH, etc.)*

1. TYPE	2. LOCATION OF MEASUREMENTS	3. RESULTS
None		

Continue On Page 3

Continued From Page 2

IV. SAMPLING INFORMATION (continued)

C. PHOTOS

1. TYPE OF PHOTOS: [X] a. GROUND [ ] b. AERIAL

2. PHOTOS IN CUSTODY OF: Region 6 EPA (attached)

D. SITE MAPPED?

[X] YES. SPECIFY LOCATION OF MAPS: USGS Topographic Map (attachment Map A) Lake Catherine Quad.

E. COORDINATES

1. LATITUDE (deg.-min.-sec.): 34°28'00"N

2. LONGITUDE (deg.-min.-sec.): 92°56'52"W

V. SITE INFORMATION

A. SITE STATUS

[X] 1. ACTIVE (Those industrial or municipal sites which are being used for waste treatment, storage, or disposal on a continuing basis, even if infrequently.)

[ ] 2. INACTIVE (Those sites which no longer receive wastes.)

[ ] 3. OTHER (specify): (Those sites that include such incidents like "midnight dumping" where no regular or continuing use of the site for waste disposal has occurred.)

B. IS GENERATOR ON SITE?

[ ] 1. NO [X] 2. YES (specify generator's four-digit SIC Code): 2819

C. AREA OF SITE (in acres): 50 acres

D. ARE THERE BUILDINGS ON THE SITE?

[ ] 1. NO [X] 2. YES (specify): Milling and production buildings

VI. CHARACTERIZATION OF SITE ACTIVITY

Indicate the major site activity(ies) and details relating to each activity by marking 'X' in the appropriate boxes.

	A. TRANSPORTER		B. STORER		C. TREATER		D. DISPOSER
	1. RAIL		1. PILE		1. FILTRATION		1. LANDFILL
	2. SHIP	X	2. SURFACE IMPOUNDMENT		2. INCINERATION		2. LANDFARM
	3. BARGE		3. DRUMS		3. VOLUME REDUCTION		3. OPEN DUMP
	4. TRUCK		4. TANK, ABOVE GROUND		4. RECYCLING/RECOVERY	X	4. SURFACE IMPOUNDMENT
	5. PIPELINE		5. TANK, BELOW GROUND	X	5. CHEM./PHYS./TREATMENT		5. MIDNIGHT DUMPING
	6. OTHER (specify):		6. OTHER (specify):		6. BIOLOGICAL TREATMENT		6. INCINERATION
					7. WASTE OIL REPROCESSING		7. UNDERGROUND INJECTION
					8. SOLVENT RECOVERY	X	8. OTHER (specify): Backfilling impoundment wastes to mine pits.
					9. OTHER (specify):		

E. SUPPLEMENTAL REPORTS: If the site falls within any of the categories listed below, Supplemental Reports must be completed. Indicate which Supplemental Reports you have filled out and attached to this for..

[ ] 1. STORAGE [ ] 2. INCINERATION [ ] 3. LANDFILL [X] 4. SURFACE IMPOUNDMENT [ ] 5. DEEP WELL

[ ] 6. CHEM/BIO/PHYS TREATMENT [ ] 7. LANDFARM [ ] 8. OPEN DUMP [ ] 9. TRANSPORTER [ ] 10. RECYCLOR/RECLAIMER

VII. WASTE RELATED INFORMATION

A. WASTE TYPE

[ ] 1. LIQUID [X] 2. SOLID [ ] 3. SLUDGE [ ] 4. GAS

B. WASTE CHARACTERISTICS

[X] 1. CORROSIVE [ ] 2. IGNITABLE [ ] 3. RADIOACTIVE [ ] 4. HIGHLY VOLATILE

[ ] 5. TOXIC [ ] 6. REACTIVE [X] 7. INERT [ ] 8. FLAMMABLE

[ ] 9. OTHER (specify):

C. WASTE CATEGORIES

1. Are records of wastes available? Specify items such as manifests, inventories, etc. below.

Wastes are monitered through NPDES program.

 Continue On Reverse

Continued From Front

V. WASTE RELATED INFORMATION (continued)

2. Estimate the amount (specify unit of measure) of waste by category. mark 'X' to indicate which wastes are present.

a. SLUDGE	b. OIL	c. SOLVENTS	d. CHEMICALS	e. SOLIDS	f. OTHER
AMOUNT: Unknown	AMOUNT: None	AMOUNT: None	AMOUNT: Unknown	AMOUNT: Unknown	AMOUNT: None
UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE	UNIT OF MEASURE
(1) PAINT, PIGMENTS	(1) OILY WASTES	(1) HALOGENATED SOLVENTS	(1) ACIDS	(1) FLYASH	(1) LABORATORY, PHARMACEUT.
(2) METALS SLUDGES	(2) OTHER(specify):	(2) NON-HALOGNTD. SOLVENTS	(2) PICKLING LIQUORS	(2) ASBESTOS	(2) HOSPITAL
(3) POTW		(3) OTHER(specify)	(3) CAUSTICS	(3) MILLING/MINE TAILINGS	(3) RADIOACTIVE
(4) ALUMINUM SLUDGE			(4) PESTICIDES	(4) FERROUS SMELTING WASTES	(4) MUNICIPAL
(5) OTHER(specify):			(5) DYES/INKS	(5) NON-FERROUS SMLTG. WASTES	(5) OTHER(specify)
Scrubber Sludge			(6) CYANIDE	(6) OTHER(specify):	
			(7) PHENOLS		
			(8) HALOGENS		
			(9) PCB		
			(10) METALS		
			(11) OTHER(specify): Chlorides		

D. LIST SUBSTANCES OF GREATEST CONCERN WHICH ARE ON THE SITE (place in descending order of hazard)

1. SUBSTANCE	2. FORM (mark 'X') a. SOLID	b. LIQ.	c. VAPOR	3. TOXICITY (mark 'X') a. HIGH	b. MED.	c. LOW	d. NONE	4. CAS NUMBER	5. AMOUNT	6. UNIT
Chlorides		X						None	~~Unknown~~	
Metals	X							~~None~~	Unknown	

VIII. HAZARD DESCRIPTION

FIELD EVALUATION HAZARD DESCRIPTION: Place an 'X' in the box to indicate that the listed hazard exists. Describe the hazard in the space provided.

☐ A. HUMAN HEALTH HAZARDS

Continue On Page 5

Continued From Page 4

VIII. HAZARD DESCRIPTION *(continued)*

☐ B. NON-WORKER INJURY/EXPOSURE

☐ C. WORKER INJURY/EXPOSURE

☐ D. CONTAMINATION OF WATER SUPPLY

☐ E. CONTAMINATION OF FOOD CHAIN

☒ F. CONTAMINATION OF GROUND WATER

Possibility of Groundwater contamination due to unlined surface impoundments. State Pollution Control has sampled local wells and has completed resistivity survey.

☒ G. CONTAMINATION OF SURFACE WATER

All discharges are permitted through NPDES program. SIte has past history of excessive siltation after heavy rainfalls into Lake Catherine.

Continue On Reverse

Continued From Front

VIII. HAZARD DESCRIPTION *(continued)*

☐ H. DAMAGE TO FLORA/FAUNA

☐ I. FISH KILL

☐ J. CONTAMINATION OF AIR

☐ K. NOTICEABLE ODORS

☐ L. CONTAMINATION OF SOIL

☐ M. PROPERTY DAMAGE

Continue On Page 7

Continued From Page 6

VIII. HAZARD DESCRIPTION *(continued)*

☐ N. FIRE OR EXPLOSION

☐ O. SPILLS/LEAKING CONTAINERS/RUNOFF/STANDING LIQUID

☐ P. SEWER, STORM DRAIN PROBLEMS

☐ Q. EROSION PROBLEMS

☐ R. INADEQUATE SECURITY

☐ S. INCOMPATIBLE WASTES

Continue On Reverse

VIII. HAZARD DESCRIPTION (continued)

☐ T. MIDNIGHT DUMPING

☒ U. OTHER (specify):

Site is an active mining and milling producer of Vanadium Oxide. Site has no RCRA permits at this time and is covered under the Small Quanity Generator program. All discharges are permitted through NPDES program, and state air and water permits. The FIT has no jurisdiction, and recommends that no further action be taken.

IX. POPULATION DIRECTLY AFFECTED BY SITE

A. LOCATION OF POPULATION	B. APPROX. NO. OF PEOPLE AFFECTED	C. APPROX. NO. OF PEOPLE AFFECTED WITHIN UNIT AREA	D. APPROX. NO. OF BUILDINGS AFFECTED	E. DISTANCE TO SITE (specify units)
1. IN RESIDENTIAL AREAS	1000	1000	70	½ mile
2. IN COMMERCIAL OR INDUSTRIAL AREAS	200	200	10	½ mile
3. IN PUBLICLY TRAVELLED AREAS	0	0	0	--
4. PUBLIC USE AREAS (parks, schools, etc.)	1000	1000	0	½ mile

X. WATER AND HYDROLOGICAL DATA

A. DEPTH TO GROUNDWATER (specify unit)	B. DIRECTION OF FLOW	C. GROUNDWATER USE IN VICINITY
15'-20' feet	Mainly to south/topographically controlled	Drinking water
D. POTENTIAL YIELD OF AQUIFER	**E. DISTANCE TO DRINKING WATER SUPPLY (specify unit of measure)**	**F. DIRECTION TO DRINKING WATER SUPPLY**
Unknown	½ mile	South

G. TYPE OF DRINKING WATER SUPPLY

☐ 1. NON-COMMUNITY < 15 CONNECTIONS* ☒ 2. COMMUNITY (specify town) > 15 CONNECTIONS Hot Springs Ark

☐ 3. SURFACE WATER ☒ 4. WELL

Continue On Page 9

Continued From Page 8

X. WATER AND HYDROLOGICAL DATA (continued)

H. LIST ALL DRINKING WATER WELLS WITHIN A 1/4 MILE RADIUS OF SITE

1. WELL	2. DEPTH (specify unit)	3. LOCATION (proximity to population/buildings)	4. NON-COMMUNITY (mark 'X')	5. COMMUNITY (mark 'X')
9	30'-40' ft	Attached Map shows houses and owners names 1/4 mile from site attachment Map 'B'	x	

I. RECEIVING WATER

1. NAME: Lake Catherine

2. SEWERS ☐ 3. STREAMS/RIVERS ☐ 4. LAKE/RESERVOIRS [X] 5. OTHER (specify) ☐

6. SPECIFY USE AND CLASSIFICATION OF RECEIVING WATERS

Propogation of fish and wildlife/community raw fresh water supply
Primary contact recreation and non-contact recreation

XI. SOIL AND VEGITATION DATA

LOCATION OF SITE IS IN

[X] A. KNOWN FAULT ZONE ☐ B. KARST ZONE ☐ C. 100 YEAR FLOOD PLAIN ☐ D. WETLAND

☐ E. A REGULATED FLOODWAY ☐ F. CRITICAL HABITAT ☐ G. RECHARGE ZONE OR SOLE SOURCE AQUIFER

XII. TYPE OF GEOLOGICAL MATERIAL OBSERVED

Mark 'X' to indicate the type(s) of geological material observed and specify where necessary, the component parts.

'X'	A. OVERBURDEN	'X'	B. BEDROCK (specify below)	'X'	C. OTHER (specify below)
X	1. SAND Terrace				
X	2. CLAY Deposit	X	Stanley Shale		
X	3. GRAVEL				

XIII. SOIL PERMEABILITY

☐ A. UNKNOWN ☐ B. VERY HIGH (100,000 to 1000 cm/sec.) ☐ C. HIGH (1000 to 10 cm/sec.)

[X] D. MODERATE (10 to .1 cm/sec.) ☐ E. LOW (.1 to .001 cm/sec.) ☐ F. VERY LOW (.001 to .00001 cm/sec.)

G. RECHARGE AREA

[X] 1. YES ☐ 2. NO 3. COMMENTS: Only along terrace deposits that outgroup along Lake Catherine.

H. DISCHARGE AREA

☐ 1. YES [X] 2. NO 3. COMMENTS

I. SLOPE

1. ESTIMATE % OF SLOPE: 4%

2. SPECIFY DIRECTION OF SLOPE, CONDITION OF SLOPE, ETC.: Mainly southern facing

J. OTHER GEOLOGICAL DATA

Terrace deposits on shores of Lake Catherine are underlain by the Stanley Shale. Principle mining activities are in cretaceous igneous rocks that include undifferentiated rock of Paleozoic age. Structure of the area is a very complex series of faults and folded strata. Local water wells only penetrate into the terrace deposits to approximatley 30'-40'.

 Continue On Reverse

Continued From Front

XIV. PERMIT INFORMATION

List all applicable permits held by the site and provide the related information.

A. PERMIT TYPE (e.g., RCRA, State, NPDES, etc.)	B. ISSUING AGENCY	C. PERMIT NUMBER	D. DATE ISSUED (mo., day, & yr.)	E. EXPIRATION DATE (mo., day, & yr.)	F. IN COMPLIANCE (mark 'X') 1. YES	2. NO	3. UNKNOWN
NPDES	EPA	AR0000523	11/16/74	None			X
State Water	ADPCP ARK	691	03/15/67	None			X
State Water	ADPCE ARK	1938 W	02/17/77	None			X
State Water	ADPCE ARK	2524 W	03/04/81	None			X
State Water	ADPCE ARK	10AR-1	07/30/70	None			X

XV. PAST REGULATORY OR ENFORCEMENT ACTIONS

☐ NONE ☒ YES (summarize in this space)

There is an ongoing state investigation concerning compliance with respect to state water and NPDES permits discharges. At the time of the FIT's inspection the state records were unavailable due to pending litagation.

Site is a small quanity generator and a RCRA permit is not required at this time.

NOTE: Based on the information in Sections III through XV, fill out the Tentative Disposition *(Section II)* information on the first page of this form.

SURFACE IMPOUNDMENTS SITE INSPECTION REPORT
(Supplemental Report)

INSTRUCTION
Answer and Explain as Necessary.

1. TYPE OF IMPOUNDMENT

Tailings impoundment

2. STABILITY/CONDITION OF EMBANKMENTS

Stable/periodically checked with survey instruments

3. EVIDENCE OF SITE INSTABILITY *(Erosion, Settling, Sink Holes, etc.)*

☐ YES ☒ NO

4. EVIDENCE OF DISPOSAL OF IGNITABLE OR REACTIVE WASTE

☐ YES ☒ NO

5. ONLY COMPATIBLE WASTES ARE STORED OR DISPOSED OF IN THE IMPOUNDMENT

☒ YES ☐ NO

6. RECORDS CHECKED FOR CONTENTS AND LOCATION OF EACH SURFACE IMPOUNDMENT

☐ YES ☒ NO

7. IMPOUNDMENT HAS LINER SYSTEM

☐ YES ☒ NO

7a. INTEGRITY OF LINER SYSTEM CHECKED

☐ YES ☒ NO

7b. FINDINGS

Impoundment is well kept & structurally sound

8. SOIL STRUCTURE AND SUBSTRUCTURE

Unknown

9. MONITORING WELLS

☒ YES ☐ NO depth unknown

10. LENGTH, WIDTH, AND DEPTH

LENGTH 2500' WIDTH 1000' DEPTH 50'

11. CALCULATED VOLUMETRIC CAPACITY

12,500000 cubic feet

12. PERCENT OF CAPACITY REMAINING

25% - 30%

13. ESTIMATE FREEBOARD

10' - 15'

14. SOLIDS DEPOSITION

☒ YES ☐ NO

15. DREDGING DISPOSAL METHOD

None

16. OTHER EQUIPMENT

EPA Form T2070-3C (10-79)

SURFACE IMP. ,DMENTS SITE INSPECTION REPORT
(Supplemental Report)

INSTRUCTION
Answer and Explain as Necessary.

1. TYPE OF IMPOUNDMENT

2 Effluent ponds

2. STABILITY/CONDITION OF EMBANKMENTS

Stable/embankments are seeded with grasses & legumes

3. EVIDENCE OF SITE INSTABILITY *(Erosion, Settling, Sink Holes, etc.)*

☐ YES ☒ NO

4. EVIDENCE OF DISPOSAL OF IGNITABLE OR REACTIVE WASTE

☐ YES ☒ NO

5. ONLY COMPATIBLE WASTES ARE STORED OR DISPOSED OF IN THE IMPOUNDMENT

☒ YES ☐ NO

6. RECORDS CHECKED FOR CONTENTS AND LOCATION OF EACH SURFACE IMPOUNDMENT

☒ YES ☐ NO

7. IMPOUNDMENT HAS LINER SYSTEM

☐ YES ☒ NO Orthoclase material

7a. INTEGRITY OF LINER SYSTEM CHECKED

☐ YES ☒ NO

7b. FINDINGS

Impoundments are well kept and structurally sound.

8. SOIL STRUCTURE AND SUBSTRUCTURE

Unknown

9. MONITORING WELLS

☒ YES ☐ NO depth unknown

10. LENGTH, WIDTH, AND DEPTH

LENGTH 500' WIDTH 400' DEPTH unknown

11. CALCULATED VOLUMETRIC CAPACITY

200,000 surface square feet each

12. PERCENT OF CAPACITY REMAINING

5-10%

13. ESTIMATE FREEBOARD

2'-4'

14. SOLIDS DEPOSITION

☐ YES ☒ NO

15. DREDGING DISPOSAL METHOD

none

16. OTHER EQUIPMENT

EPA Form T2070-3C (10-79)

SURFACE IM. ...NDMENTS SITE INSPECTION REPORT
(Supplemental Report)

INSTRUCTION
Answer and Explain as Necessary.

1. TYPE OF IMPOUNDMENT

3 Scrubber Ponds

2. STABILITY/CONDITION OF EMBANKMENTS

Stable/Embankments are seeded with grasses and legumes

3. EVIDENCE OF SITE INSTABILITY *(Erosion, Settling, Sink Holes, etc.)*

☐ YES ☒ NO

4. EVIDENCE OF DISPOSAL OF IGNITABLE OR REACTIVE WASTE

☐ YES ☒ NO

5. ONLY COMPATIBLE WASTES ARE STORED OR DISPOSED OF IN THE IMPOUNDMENT

☒ YES ☐ NO

6. RECORDS CHECKED FOR CONTENTS AND LOCATION OF EACH SURFACE IMPOUNDMENT

☐ YES ☒ NO

7. IMPOUNDMENT HAS LINER SYSTEM

☐ YES ☐ NO Orthoclase material

7a. INTEGRITY OF LINER SYSTEM CHECKED

☐ YES ☒ NO

7b. FINDINGS

Impoundments are well kept and structurally sound

8. SOIL STRUCTURE AND SUBSTRUCTURE

Unknown

9. MONITORING WELLS

☒ YES ☐ NO depth unknown

10. LENGTH, WIDTH, AND DEPTH

LENGTH 500' WIDTH 400' DEPTH Unknown

11. CALCULATED VOLUMETRIC CAPACITY

Surface capacity of approximately 200,000 square feet each

12. PERCENT OF CAPACITY REMAINING

5 - 10%

13. ESTIMATE FREEBOARD

2'-4'

14. SOLIDS DEPOSITION

☒ YES ☐ NO

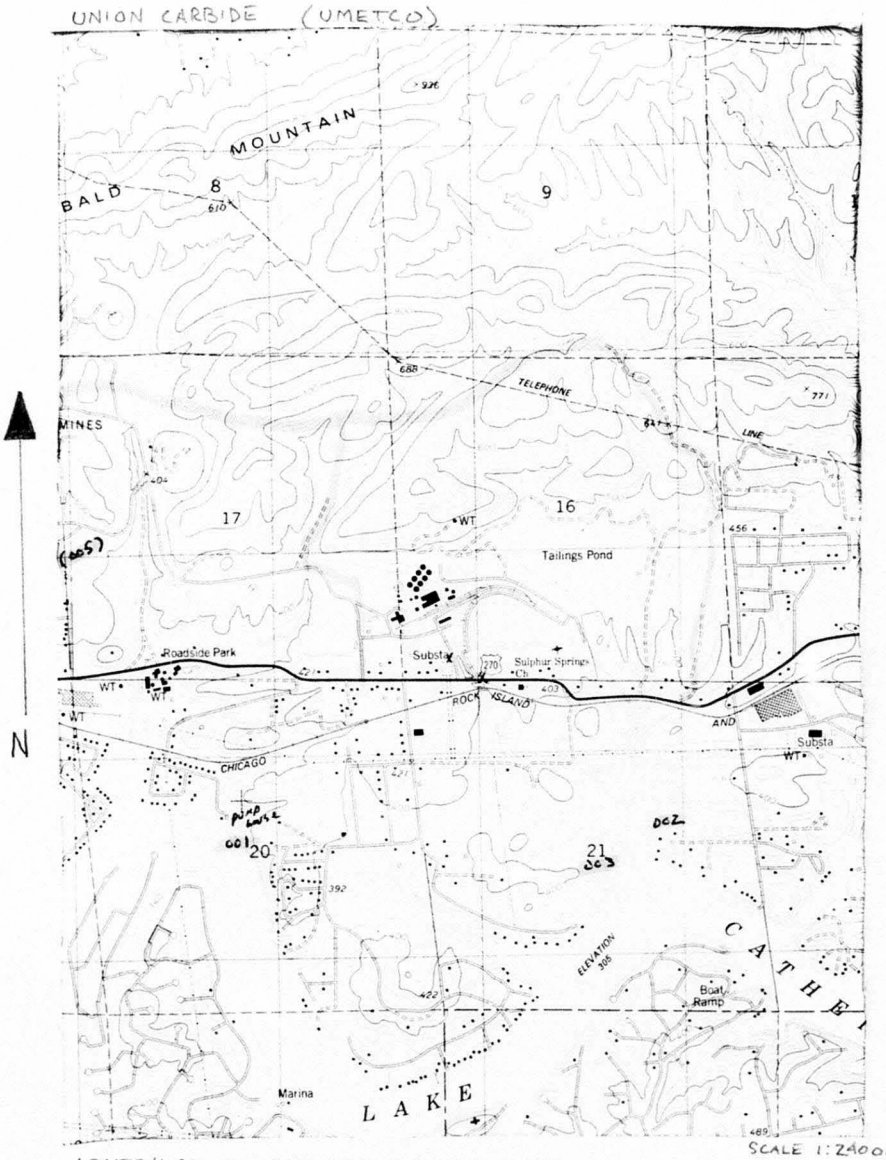
15. DREDGING DISPOSAL METHOD

Bucket scoop with crane to backfill at mine pits/

16. OTHER EQUIPMENT

EPA Form T2070-3C (10-79)

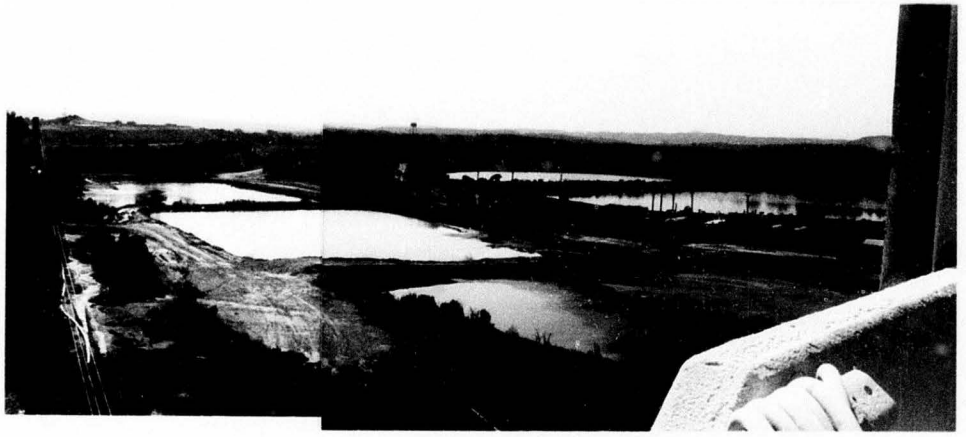
MAP A



MAP B

OWNER NAMES AND LOCATION OF DRINKING WATER WELLS WITHIN 1/4 MILE

SCALE 1:24000



Photographer / Witness

Date / Time / Direction
7/10/85 10:15 SE

Comments:
SCRUBBER PONDS IN FOREGROUND
AFFLUENT PONDS IN BACKGROUND

Photographer / Witness
Ray Tall

Date / Time / Direction
7/10/85 10:00AM SE

Comments:
PAGE 1 of 2
TAILINGS POND

Photographer / Witness

Date / Time / Direction

7/10/85 / 10:00 AM / SE.

Comments:

PAGE 2 OF 2

TAILINGS POND